

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF TEXAS
AUSTIN DIVISION**

IN RE: § **CASE NO. 25-10935-smr**
§
COWAN FITNESS SOUTH §
ROUND ROCK, LLC §
§
§
DEBTOR § **CHAPTER 11**
§ **SUBCHAPTER V**

DEBTOR'S MOTION TO USE CASH COLLATERAL

TO THE HONORABLE U.S. BANKRUPTCY JUDGE:

Comes now Cowan Fitness South Round Rock, LLC, the Debtor in Possession in the above entitled and numbered Chapter 11 Subchapter V proceeding (the “Debtor”), and files this motion seeking authority to use cash collateral to pay expenses of its business operations and this Chapter 11 case, and in support thereof would respectfully show the Court as follows.

SUMMARY OF RELIEF SOUGHT

1. The Debtor is a Texas limited liability company that operates a fitness studio/gym in Round Rock, Texas. The Debtor employs a studio manager, sales associates, trainers and support staff. All are W-2 Employees.

2. By this Motion, the Debtor seeks to use the cash collateral of Wells Fargo, First National Bank (“FNB”), the U.S. Small Business Administration (“SBA”) and Firestone Financial/Berkshire Hathaway (“Firestone”) (collectively, “the Lenders”). The Lenders, their lien priorities, UCC filing information, approximate outstanding balances and values of their respective shares of the collateral are as follows:

Lien Holder	UCC Filing Date	UCC Filing No.	Estimated Debt	Estimated Collateral Value
Wells Fargo	04/29/2016 Continuation 10/20/2020	16-0013809836 20-005855041	\$418,967.59	\$6,050.00
Yadkin Bank (now First National Bank) SBA	07/28/2016; Continuation 06/15/2024	16-0024796661; 21-00248073	\$191,842.91	\$0
Yadkin Bank (now First National Bank) SBA	07/28/2016; Continuation 06/15/2024	16-0024797056; 21-00248074	See above	\$0
Firestone Financial	05/29/2020 Continuation 08/04/2023	20-0021246380 23-00343449	\$5,199.00	\$1,400.00
Firestone Financial	12/06/2018 Collateral Change 01/23/2019 Continuation 08/07/2023	18-0042658973 19-00026969 23-00345317	See above	See above
Firestone Financial	09/25/2019 Continuation 08/20/2024	19-0036517587 24-00477228	See above	See above
SBA	07/21/2020	20-0037139813	\$365,078.61	\$0
Ascentium Lease on 14 treadmills	02/26/2025	25-0007925161	\$88,434.50	\$69,986.00

3. The Debtor asserts that no person or entity has a lien on its deposit accounts as no creditor has complied with Tex. Bus. and Comm. Code § 9.312.

4. The Debtor specifically requests authority to use cash collateral in the amounts and for the purposes set forth in the budget attached as Exhibit A.

BACKGROUND

5. These Chapter 11 proceedings were commenced by a voluntary petition filed on March 24, 2025. At this time, the Debtor continues to operate its business and manage its affairs as a debtor in possession pursuant to §§ 1107 and 1108 of Bankruptcy Code. The Debtor has all of the rights, duties and powers of a trustee under § 1106 of Bankruptcy Code, except as limited by 11 U.S.C. § 1107(a).

6. In the course of its business, the Debtor incurs expenses for payroll, rent, telephone, internet, marketing, insurance, and supplies. The Debtor receives revenue from its customers for monthly membership fees.

7. In addition, the Debtor has expenses of this case that it must pay—specifically, the Debtor has requested that it may employ Frank B. Lyon as its attorney (an application for approval of that employment has been filed). The Debtor must also employ an accountant in the case and the Subchapter V Trustee must be paid.

8. It is critical to the operation of the Debtor's business, and to its reorganization efforts, that it be permitted to pay these expenses when due. The Debtor's primary source of income from which it might pay such expenses is the revenue from its customers for their membership and personal training fees. The Debtor will deposit this income into its DIP operating account pending entry of an order (or the consent of the Lenders) allowing use of cash collateral.

9. Attached hereto as Exhibit A is a six-week budget for the Debtor, showing projected income, expenses and beginning and ending cash. The amounts listed are reasonable and good faith estimations of what the Debtor needs to spend and/or accrue each month for the items identified.

10. Also attached hereto are the following exhibits:

Exhibit	Description
B	UCC Lien Search dated 03/16/2025 (8 days prior to Petition Date)
C	UCCs of Wells Fargo/SBA
D	UCC-1s of Yadkin Bank/FNB/SBA
E	UCC-1 of Firestone Financial
F	UCC-1 of SBA
G	UCC-1 of Ascentium

11. The Debtor requests authority to use cash collateral to pay the reasonable expenses of its business operations and the reasonable expenses of the administration of this case. Specifically, the Debtor requests authority to use the cash collateral to pay up to 110% of each of the expenses set forth on Exhibit A, so long as the total of cash collateral spent during the month does not exceed by more than 5% the amount set forth on Exhibit A as that month's total.

12. The Debtor requests, in order to provide adequate protection to the Lenders that they be granted replacement security interests in and liens upon all categories of property of the Debtor and its estate upon which they each held valid, perfected and enforceable pre-petition liens and security interests in the same priority as pre-petition to the extent and only to the extent that such pre-petition lien and security interests are valid, perfected, enforceable and nonavoidable.

13. This Motion is being filed the first business day after the filing of the Voluntary Petition.

WHEREFORE, PREMISES CONSIDERED, Debtor requests the Court to enter an order granting the Motion on an interim basis, and to set a final hearing within fourteen days thereafter and, after such notice and hearing, to enter a final order authorizing the Debtor to use cash collateral according to the attached budget and the terms requested in this Motion, and granting such other and further relief to which it might show itself to be entitled.

Dated: March 25, 2025.

Respectfully submitted,

/ s / Frank B. Lyon
Frank B. Lyon, Texas SBN 12739800
Physical Address:
3800 North Lamar Boulevard, Suite 200
Austin, Texas 78756
Mailing Address:
Post Office Box 50210
Austin, Texas 78763
512-345-8964 / Fax 512-647-0047
Email: frank@franklyon.com

PROPOSED ATTORNEY FOR THE DEBTOR IN
POSSESSION, COWAN FITNESS SOUTH ROUND
ROCK, LLC

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of the foregoing motion was served on March 25, 2025, on the persons named below, at the addresses indicated and by the means indicated and the attached matrix by US Mail.

Assistant United States Trustee

Gary Wright
By ECF

Subchapter V Trustee

Eric Terry
By ECF

Debtor

Cowan Fitness North Round Rock, LLC
Attn: Greg Cowan/Kathy Cowan
Email: gcowan21@hotmail.com
Email: dannyodiamonds@msn.com

/s / Frank B. Lyon

**EXHIBIT
A**

6 Week Budget

Store Number:	Cowan Fitness South Round Rock LLC
Location:	OT - 0308 Round Rock
Start Date:	3/30/25
End Date:	5/10/25

PROFIT AND LOSS

	Mar 30-April 5		April 6 - 12	April 13-19	April 20-26	April 27 - May 3	May 4-10
	Beginning Cash	\$ 60,000.00	\$35,099.00	\$43,068.00	\$36,010.00	\$ 41,625.00	\$ 16,724.00
Ordinary Income Expense							
Drop In Revenue		\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00
Package Revenue		\$ 13,183.00	\$13,183.00	\$13,183.00	\$13,183.00	\$ 13,183.00	\$13,183.00
Membership Revenue - varies monthly							
Internal Events							
Cross Regional Classes - Franchisor administered		\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)
Clothing							
Heart Rate Monitor Revenue (varies monthly)		\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00
Chargebacks			\$ (132.00)		\$ (132.00)		\$ (132.00)
Total Revenue		\$ 12,763.00	\$12,631.00	\$12,763.00	\$12,631.00	\$ 12,763.00	\$ 12,631.00
Direct Labor - Trainer/Instructor Wages		\$ 11,700.00		\$11,700.00		\$ 11,700.00	
Direct Labor - Trainer/Instructor Bonus		\$ 535.00		\$ 535.00		\$ 535.00	
Merchant Charges - credit card processing					\$ 1,482.00		
Retail Product Costs			\$ 992.00		\$ 992.00		\$ 992.00
Total Cost of Goods/Services		\$ 12,235.00	\$ 992.00	\$12,235.00	\$ 2,474.00	\$ 12,235.00	\$ 992.00
Gross Profit		\$ 528.00	\$11,639.00	\$ 528.00	\$10,157.00	\$ 528.00	\$ 11,639.00
Total Personnel (Fixed Costs)							
Payroll Taxes		\$ 2,765.00		\$ 2,765.00		\$ 2,765.00	
Reimbursed Expenses		\$ 150.00		\$ -		\$ 150.00	
Payroll Processing Fees - ADP		\$ 207.00		\$ 207.00		\$ 207.00	
Officers Health Insurance - Life Insurance				\$ 81.00			
Total Personnel (Other Costs)		\$ 3,122.00	\$ -	\$ 3,053.00	\$ -	\$ 3,122.00	\$ -
Rent		\$ 11,730.00		\$ -		\$ 11,730.00	
Storage Rent			\$ -				
Repairs & Maintenance				\$ 500.00			
Utilities		\$ 1,000.00		\$ -		\$ 1,000.00	
Music System							
Cleaning		\$ -				\$ -	
Janitorial Expense		\$ 215.00				\$ 215.00	
Telephone/Internet Expense			\$ 390.00				\$ 390.00
Total Facility		\$ 12,945.00	\$ 390.00	\$ 500.00	\$ -	\$ 12,945.00	\$ 390.00
General Liability Insurance		\$ 632.00		\$ -		\$ 632.00	
Total Insurance		\$ 632.00	\$ -	\$ -	\$ -	\$ 632.00	\$ -
Direct Marketing - required by Franchisor		\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00
National Marketing Fund - 3% of Revenue paid to Franchisor			\$ 1,650.00		\$ -		\$ 1,650.00
Contestant Incentive							
Total Marketing		\$ 355.00	\$ 2,005.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 2,005.00
Professional Fees - Accounting				\$ 603.00			
Professional Fees - Legal		\$ 4,000.00		\$ -	\$ -	\$ 4,000.00	
Sub V Trustee Fees		\$ 1,000.00		\$ -	\$ -	\$ 1,000.00	
Software Lease/Support paid to Franchisor		\$ -		\$ 1,048.00	\$ -		
Royalty Fees - 6% of revenue paid to Franchisor		\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00
Printing and Reproduction			\$ 400.00				\$ 400.00
Office Supplies				\$ 250.00			
Dues and Subscriptions			\$ 50.00				\$ 50.00
Equipment Lease - 14 Treadmills				\$ -	\$ 1,964.00		
Equipment Repairs & Maintenance		\$ 550.00				\$ 550.00	
Bank Service Charges							
Music/On Hold							
Total General and Administrative		\$ 6,375.00	\$ 1,275.00	\$ 1,678.00	\$ 3,837.00	\$ 6,375.00	\$ 1,275.00
Total Expenses		\$ 23,429.00	\$ 3,670.00	\$ 5,586.00	\$ 4,192.00	\$ 23,429.00	\$ 3,670.00
Net Operating Income		\$ (22,901.00)	\$ 7,969.00	\$ (5,058.00)	\$ 5,965.00	\$ (22,901.00)	\$ 7,969.00

Other Miscellaneous Income

Total Other Income	\$	-	\$	-	\$	-	\$	-	\$	-	-	
Taxes - Local					\$	350.00			\$		-	
Miscellaneous Expense												
Automobile Expense	\$	-					\$		\$	-		
Meals												
Travel Expense					\$	-						
Owner Compensation - Greg Cowan	\$	1,000.00			\$	1,000.00			\$	1,000.00		
Owner Compensation - Kathy Cowan	\$	1,000.00			\$	1,000.00			\$	1,000.00		
Interest & Credit Expense												
SBA Interest Expense	\$	-					\$		\$	-		
Finance Charge					\$	-						
Total Other Expenses	\$	2,000.00	\$	-	\$	2,000.00	\$	350.00	\$	2,000.00	\$	-

Net Income	\$ (24,901.00)	\$ 7,969.00	\$ (7,058.00)	\$ 5,615.00	\$ (24,901.00)	\$ 7,969.00
Ending Cash	\$ 35,099.00	\$43,068.00	\$36,010.00	\$41,625.00	\$ 16,724.00	\$ 24,693.00

**EXHIBIT
B**

TEXAS SECRETARY of STATE
JANE NELSON

Debtor Name Search

This debtor name search was performed on **03/16/2025 12:18 PM** with the following search parameters:

DEBTOR NAME: COWAN FITNESS SOUTH ROUND ROCK

CITY: [Not Specified]

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		16-0013809836	Financing Statement	04/29/2016 10:06 AM	1	04/29/2026
<input type="checkbox"/>		20-00585041	Continuation	11/20/2020 04:40 PM	1	n/a
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		661 LOUIS HENNA BLVD, STE 450 ROUND ROCK, TX, 78664		
Secured Party		WELLS FARGO BANK, NATIONAL ASSOCIATION		625 MARQUETTE AVE 13TH FLOOR MINNEAPOLIS, MN, 55402		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		16-0024796661	Financing Statement	07/28/2016 02:10 PM	2	07/28/2026
<input type="checkbox"/>		21-00248073	Continuation	06/15/2021 01:41 PM	1	n/a
Debtor		COWAN FITNESS NORTH ROUND ROCK LLC		311 UNIVERSITY BLVD., SUITE 100 ROUND ROCK, TX, 78665		
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		661 LOUIS HENNA BLVD., SUITE 450 ROUND ROCK, TX, 78664		
Secured Party		YADKIN BANK		10200 MALLARD CREEK RD, BLDG #1, SUITE 210 CHARLOTTE, NC, 28262		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		16-0024797056	Financing Statement	07/28/2016 02:13 PM	2	07/28/2026
<input type="checkbox"/>		21-00248074	Continuation	06/15/2021 01:41 PM	1	n/a
Debtor		COWAN FITNESS NORTH ROUND ROCK LLC		311 UNIVERSITY BLVD., SUITE 100 ROUND ROCK, TX, 78665		
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		661 LOUIS HENNA BLVD., SUITE 450 ROUND ROCK, TX, 78664		
Secured Party		YADKIN BANK		10200 MALLARD CREEK RD, BLDG #1, SUITE 210 CHARLOTTE, NC, 28262		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		18-0042500747	Financing Statement	12/05/2018 05:00 PM	3	12/05/2028
<input type="checkbox"/>		23-00343449	Continuation	08/04/2023 02:41 PM	1	n/a
Debtor		COWAN FITNESS SOUTH ROUND ROCK, LLC		808 SHADY BLUFF COVE ROUND ROCK, TX, 78665		
Debtor		ORAGETHEORY FITNESS		808 SHADY BLUFF COVE ROUND ROCK, TX, 78665		
Secured Party		FIRESTONE FINANCIAL, LLC		117 KENDRICK STREET, SUITE 200 NEEDHAM, MA, 02494-2728		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		18-0042658973	Financing Statement	12/06/2018 05:00 PM	3	12/06/2028
<input type="checkbox"/>		19-00026969	Collateral Change	01/23/2019 09:14 AM	2	n/a
<input type="checkbox"/>		23-00345317	Continuation	08/07/2023 05:00 PM	2	n/a
Debtor		COWAN FITNESS SOUTH ROUND ROCK, LLC		661 LOUIS HENNA BLVD STE 450		
Debtor		ORAGETHEORY FITNESS		661 LOUIS HENNA BLVD STE 450		
Secured Party		FIRESTONE FINANCIAL, LLC		117 KENDRICK STREET, SUITE 200		
				NEEDHAM, MA, 02494-2728		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		19-0036517587	Financing Statement	09/25/2019 01:49 PM	1	09/25/2029
<input type="checkbox"/>		24-00477228	Continuation	08/20/2024 02:45 PM	1	n/a
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		808 SHADY BLUFF COVE		
Secured Party		FIRESTONE FINANCIAL, LLC		ROUND ROCK, TX, 78665		
				117 KENDRICK STREET, SUITE 200		
				NEEDHAM, MA, 02494-2728		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		20-0037139813	Financing Statement	07/21/2020 05:40 PM	1	07/21/2025
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		808 SHADY BLUFF COVE		
Secured Party		U.S. SMALL BUSINESS ADMINISTRATION		ROUND ROCK, TX, 78665		
				1545 HAWKINS BLVD, SUITE 202		
				EL PASO, TX, 79925		

<u>Order</u>	<u>View</u>	<u>Filing Number</u>	<u>Filing Type</u>	<u>Filing Date</u>	<u>Pages</u>	<u>Lapse Date</u>
<input type="checkbox"/>		25-0007925161	Financing Statement	02/26/2025 04:57 PM	2	02/26/2030
Debtor		COWAN FITNESS SOUTH ROUND ROCK LLC		661 LOUIS HENNA BLVD STE 450		
Secured Party		C T CORPORATION SYSTEM, AS REPRESENTATIVE		ROUND ROCK, TX, 78664		
				330 N BRAND BLVD, SUITE 700,		
				ATTN: SPRS		
				GLENDALE, CA, 91203		

Select All Filings: [Order Selected Filings](#)[Order Certificate](#)[New Search](#)**Instructions:**

- Press 'New Search' if you wish to perform another web inquiry.
- Press 'Previous' or 'Next' to scroll through the results of this inquiry.
- Enter the page number and click 'GO' button to view the desired page.
- Press 'Order Search Certificate' if you wish to order a search certificate with the parameters entered for this web inquiry.
- If you wish to order only selected filings for this debtor, check by the filings and press 'Order Selected Filings'.

- Checked filings will be retained from page to page as you scroll through the results of this inquiry.
- If an order for a search certificate or selected filings is placed against this web inquiry, the web inquiry fee will be waived.
- Check 'Select All Filings' and press 'Order Selected Filings' if you wish to order copies of all filings and full filing history for the results of this web inquiry.
- To view a particular filing document, click on the image under 'View' for the desired document.

**EXHIBIT
C**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
CT Lien Solutions
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
**CT Lien Solutions 2727 Allen Parkway Ste. 100 Houston, TX 77019 USA

FILING NUMBER: 16-0013809836

FILING DATE: 04/29/2016 10:06 AM

DOCUMENT NUMBER: 668359690001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Cowan Fitness South Round Rock LLC	OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 661 Louis Henna Blvd, Ste 450		CITY Round Rock	STATE TX	POSTAL CODE 78664	COUNTRY USA
2a. ORGANIZATION'S NAME Wells Fargo Bank, National Association	OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS 625 Marquette Ave 13th Floor		CITY Minneapolis	STATE MN	POSTAL CODE 55402	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Wells Fargo Bank, National Association	OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 625 Marquette Ave 13th Floor		CITY Minneapolis	STATE MN	POSTAL CODE 55402	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All Inventory, Chattel Paper, Accounts, Equipment, General Intangibles, Instruments, and Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

6b. Check only if applicable and check only one box.

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

Lien Solutions

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**CT Lien Solutions
2929 Allen Parkway, Ste. 100
Houston, TX 77019
USA

FILING NUMBER: 20-00585041

FILING DATE: 11/20/2020 04:40 PM

DOCUMENT NUMBER: 1008978680001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

16-0013809836

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.
Filer: attach Amendment Addendum (Form UCC3AD) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and also name of Assignor in item 9.
For partial assignment, complete item 7 and 9 and also indicate affected collateral in item 84. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. PARTY INFORMATION CHANGE:Check one of these two boxes. This Change affects Debtor or Secured Party of record. AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

Wells Fargo Bank, National Association

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY

**EXHIBIT
D**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

The First American Title Insurance Company 800-932-9966

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

First American Title Company
 901 S. 2nd Street, Suite 201
 Springfield, IL 62704
 USA

FILING NUMBER: 16-0024796661

FILING DATE: 07/28/2016 02:10 PM

DOCUMENT NUMBER: 682281310002

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

Cowan Fitness North Round Rock LLC

OR

1b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

311 University Blvd., Suite 100**Round Rock****TX****78665****USA**

2. DEBTOR'S NAME - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

Cowan Fitness South Round Rock LLC

OR

2b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

661 Louis Henna Blvd., Suite 450**Round Rock****TX****78664****USA**

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

Yadkin Bank

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

10200 Mallard Creek Rd, Bldg #1,**Charlotte****NC****28262****USA**

4. COLLATERAL: This financing statement covers the following collateral:

All equipment and machinery, including power driven machinery and equipment, furniture and fixtures now owned or hereafter acquired and wherever located, together with all replacements thereof, all attachments, accessories, parts and tools belonging thereto or for use in connection therewith and proceeds therefrom. All general intangibles now in force or hereafter acquired, wherever located and proceeds therefrom; said items are located on the property located at 311 University Blvd., Suite 100, Round Rock, TX 78665 and 661 Louis Henna Blvd., Suite 450 or wherever same may be located.

The Loan secured by this lien was made under a United States Small Business Administration (SBA) nationwide program which uses tax dollars to assist small business owners. If the United States is seeking to enforce this document, then under SBA regulations:a) When SBA is the holder of the Note, this document and all documents evidencing or securing this Loan will be construed in accordance with federal law.b) Secured Party or SBA may use local or state procedures for purposes such as filing papers, recording documents, giving notice, foreclosing liens, and other purposes.

By using these procedures, SBA does not waive any federal immunity from local or state control, penalty, tax or liability. No Borrower or Guarantor may claim

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT ADDENDUM
FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME
Cowan Fitness North Round Rock LLC
 OR
 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral)

or assert against SBA any local or state law to deny any obligation of Borrower,
 or defeat any claim of SBA with respect to this Loan. Any clause in this
 document requiring arbitration is not enforceable when SBA is the holder of the
 Note secured by this instrument.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

FILING OFFICE COPY

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

Lien Solutions

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**CT Lien Solutions
2929 Allen Parkway, Ste. 3300
Houston, TX 77019
USA

FILING NUMBER: 21-00248073

FILING DATE: 06/15/2021 01:41 PM

DOCUMENT NUMBER: 1058957970001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

16-00247966611b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.

Filer: attach Amendment Addendum (Form UCC3AD) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and also name of Assignor in item 9.

For partial assignment, complete item 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. PARTY INFORMATION CHANGE:Check one of these two boxes. This Change affects Debtor or Secured Party of record. AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

YADKIN BANK

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

The First American Title Insurance Company 800-932-9966

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

First American Title Company
901 S. 2nd Street, Suite 201
Springfield, IL 62704
USA

FILING NUMBER: 16-0024797056

FILING DATE: 07/28/2016 02:13 PM

DOCUMENT NUMBER: 682281310003

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

Cowan Fitness North Round Rock LLC

OR

1b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

311 University Blvd., Suite 100

2. DEBTOR'S NAME - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

Cowan Fitness South Round Rock LLC

OR

2b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

661 Louis Henna Blvd., Suite 450**Round Rock**

TX

78664

USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

Yadkin Bank

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

10200 Mallard Creek Rd, Bldg #1,**Suite 210**

NC

28262

USA

4. COLLATERAL: This financing statement covers the following collateral:

All inventory, raw materials, work in progress and supplies now owned or hereafter acquired, proceeds therefrom and wherever located. All accounts and accounts receivable now outstanding or hereafter arising.; said items are located on the property located at 311 University Blvd., Suite 100, Round Rock, TX 78665 and 661 Louis Henna Blvd., Suite 450, Round Rock, TX 78664 or wherever same may be located.

The Loan secured by this lien was made under a United States Small Business Administration (SBA) nationwide program which uses tax dollars to assist small business owners. If the United States is seeking to enforce this document, then under SBA regulations:a) When SBA is the holder of the Note, this document and all documents evidencing or securing this Loan will be construed in accordance with federal law.b) Secured Party or SBA may use local or state procedures for purposes such as filing papers, recording documents, giving notice, foreclosing liens, and other purposes.

By using these procedures, SBA does not waive any federal immunity from local or state control, penalty, tax or liability. No Borrower or Guarantor may claim or assert against SBA any local or state law to deny any obligation of Borrower, or defeat any claim of SBA with respect to this Loan. Any clause in this

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT ADDENDUM
FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME
Cowan Fitness North Round Rock LLC
 OR
 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral)

document requiring arbitration is not enforceable when SBA is the holder of the Note secured by this instrument.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

FILING OFFICE COPY

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

Lien Solutions

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**CT Lien Solutions
2929 Allen Parkway, Ste. 3300
Houston, TX 77019
USA

FILING NUMBER: 21-00248074

FILING DATE: 06/15/2021 01:41 PM

DOCUMENT NUMBER: 1058957990001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

16-0024797056

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.
Filer: attach Amendment Addendum (Form UCC3AD) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and also name of Assignor in item 9.
For partial assignment, complete item 7 and 9 and also indicate affected collateral in item 84. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. PARTY INFORMATION CHANGE:Check one of these two boxes. This Change affects Debtor or Secured Party of record. AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

YADKIN BANK

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY

**EXHIBIT
E**

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1557 79830 CSC 801 Adlai Stevenson Drive Springfield, IL 62703

RECEIVED
DEC 5 2018
SOS

Filed In: Texas
(S.O.S.)

18-0042500747**12/05/2018 05:00 PM****FILED**TEXAS
SECRETARY OF STATE

SOS



853497490003

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Cowan Fitness South Round Rock, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	808 Shady Bluff Cove	CITY Round Rock	STATE TX	POSTAL CODE 78665
COUNTRY USA				

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME Oragetheory Fitness				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	808 Shady Bluff Cove	CITY Round Rock	STATE TX	POSTAL CODE 78665
COUNTRY USA				

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)				
3a. ORGANIZATION'S NAME Firestone Financial, LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	117 Kendrick Street, Suite 200	CITY Needham	STATE MA	POSTAL CODE 02494-2728
COUNTRY USA				

4. COLLATERAL: This financing statement covers the following collateral:
All assets and personal property of the Borrower and any assets in which the Borrower may have previously granted a security interest to Lender in each case, whether now or hereafter existing, which is now or hereafter owned by Borrower or in which Borrower now has or hereafter acquires rights, and howsoever Borrower's interests therein may arise or appear (whether by ownership, security interest, claim or otherwise), including, but not limited to (A) all equipment, fixtures, inventory, goods, accounts, chattel paper, general intangibles, documents, instruments, contracts, securities, in each case as such terms are defined in the Code (B) the items listed below or an any Schedule "A" which may be attached hereto and made a part hereof, and (C) such items which shall be listed on any Addendums to Schedule "A" and which shall be attached to any Promissory Note or other amendment to any security agreement and made a part hereof; and (ii) all parts of, all accessions to, all replacements for, all products of, all payments of any type in lieu of or in respect of, and all documents and general intangibles covering or relating to, any or all of the foregoing; all proceeds of any and all of the foregoing Collateral and, to the extent not otherwise included, all payments under insurance (whether or not Lender is the loss payee thereof), or under any indemnity, warranty or guaranty by reason of loss to or otherwise

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: 1557 79830

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME Cowan Fitness South Round Rock, LLC
--

OR
9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
-------------------------------	--------

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR
10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--	--------

10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
----------------------	------	-------	-------------	---------

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR
11b. INDIVIDUAL'S SURNAME

11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
----------------------	------	-------	-------------	---------

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):
with respect to any of the foregoing Collateral.

13. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing
--	---

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

SCHEDULE "A"

Qty	Item Number	Description	Serial Number
14	6 TBD	FREEMOTION REFLEX TREADMILL	

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC
B. E-MAIL CONTACT AT SUBMITTER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company 251 LITTLE FALLS DRIVE Wilmington, DE 19808 USA
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

FILING NUMBER: 23-00343449**FILING DATE:** 08/04/2023 02:41 PM**DOCUMENT NUMBER:** 1272260210001**FILED:** Texas Secretary of State**IMAGE GENERATED ELECTRONICALLY FOR XML FILING****THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

1a. INITIAL FINANCING STATEMENT FILE NUMBER 18-0042500747	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13				
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement					
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b <u>and</u> address of Assignee in item 7c <u>and</u> also name of Assignor in item 9. For partial assignment, complete item 7 and 9 <u>and</u> also indicate affected collateral in item 8					
4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law					
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes. This Change affects <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record. <u>AND</u> Check <u>one</u> of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item <input type="checkbox"/> ADD name: Complete item 7a or 7b, <input type="checkbox"/> and item 7c <input type="checkbox"/> DELETE name: Give record name 7a or 7b and item 7c to be deleted in item 6a or 6b.					
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)					
6a. ORGANIZATION'S NAME	OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7a. ORGANIZATION'S NAME	OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Check only <u>one</u> box: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor					
9a. ORGANIZATION'S NAME Firestone Financial, LLC	OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:					

FILING OFFICE COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1558 26149 CSC 801 Adlai Stevenson Drive Springfield, IL 62703

*RECEIVED
DEC 6 2018
ILLINOIS SECRETARY OF STATE*

Filed In: Texas (S.O.S.)

18-0042658973**12/06/2018 05:00 PM****FILED**TEXAS
SECRETARY OF STATESOS
853837240008

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Cowan Fitness South Round Rock, LLC				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 661 Louis Henna Blvd Ste 450	CITY Round Rock	STATE TX	POSTAL CODE 78664	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME oragetheory fitness				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 661 Louis Henna Blvd Ste 450	CITY Round Rock	STATE TX	POSTAL CODE 78664	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Firestone Financial, LLC				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 117 Kendrick Street, Suite 200	CITY Needham	STATE MA	POSTAL CODE 02494-2728	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All assets and personal property of the Borrower and any assets in which the Borrower may have previously granted a security interest to Lender in each case, whether now or hereafter existing, which is now or hereafter owned by Borrower or in which Borrower now has or hereafter acquires rights, and howsoever Borrower's interests therein may arise or appear (whether by ownership, security interest, claim or otherwise), including, but not limited to (A) all equipment, fixtures, inventory, goods, accounts, chattel paper, general intangibles, documents, instruments, contracts, securities, in each case as such terms are defined in the Code (B) the items listed below or in any Schedule "A" which may be attached hereto and made a part hereof, and (C) such items which shall be listed on any Addendums to Schedule "A" and which shall be attached to any Promissory Note or other amendment to any security agreement and made a part hereof; and (ii) all parts of, all accessions to, all replacements for, all products of, all payments of any type in lieu of or in respect of, and all documents and general intangibles covering or relating to, any or all of the foregoing; all proceeds of any and all of the foregoing Collateral and, to the extent not otherwise included, all payments under insurance (whether or not Lender is the loss payee thereof), or under any indemnity, warranty or guaranty by reason of loss to or otherwise

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a: Check only if applicable and check only one box:

6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor

Seller/Buyer

Bailee/Bailor

Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

1558 26149

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

Cowan Fitness South Round Rock, LLC

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):
with respect to any of the foregoing Collateral.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the
REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16
(if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

SCHEDULE "A"

Qty	Item Number	Description	Serial Number
14	TBD	FREEMOTION REFLEX TREADMILL	

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

CSC

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Corporation Service Company
251 LITTLE FALLS DRIVE
Wilmington, DE 19808
USA

FILING NUMBER: 19-00026969

FILING DATE: 01/23/2019 09:14 AM

DOCUMENT NUMBER: 862755990001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

18-00426589731b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.
Filer: attach Amendment Addendum (Form UCC3AD) and provide Debtor's name in item 132. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement3. **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and also name of Assignor in item 9.
For partial assignment, complete item 7 and 9 and also indicate affected collateral in item 84. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. **PARTY INFORMATION CHANGE:**Check one of these two boxes. This Change affects Debtor or Secured Party of record. AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. **COLLATERAL CHANGE:** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

All assets and personal property of the Borrower and any assets in which the Borrower may have previously granted a security interest to Lender in each case, whether now or hereafter existing, which is now or hereafter owned by Borrower or in which Borrower now has or hereafter acquires rights, and howsoever Borrower's interests therein may arise or appear (whether by ownership, security interest, claim or otherwise), including, but not limited to (A) all equipment, fixtures, inventory, goods, accounts, chattel paper, general intangibles, documents, instruments, contracts, securities, in each case as such terms are defined in the Code (B) the items listed below or an any Schedule "A" which may

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

Firestone Financial, LLC

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

Debtor:Cowan Fitness South Round Rock, LLC [158057437]

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER	Same as item 1a on Amendment form 18-0042658973
---	---

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT	Same as item 9 on Amendment form
--	----------------------------------

OR	12a. ORGANIZATION'S NAME Firestone Financial, LLC
	12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME			
OR			
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

be attached hereto and made a part hereof, and (C) such items which shall be listed on any Addendums to Schedule "A" and which shall be attached to any Promissory Note or other amendment to any security agreement and made a part hereof; and (ii) all parts of, all accessions to, all replacements for, all products of, all payments of any type in lieu of or in respect of, and all documents and general intangibles covering or relating to, any or all of the foregoing; all proceeds of any and all of the foregoing Collateral and, to the extent not otherwise included, all payments under insurance (whether or not Lender is the loss payee thereof), or under any indemnity, warranty or guaranty by reason of loss to or otherwise with respect to any of the foregoing Collateral. (14) Freemotion Reflex Treadmill SN: KK15029800109, KK15029800108, KK15029800163, KK15029800158, KK15029800164, KK15029800110, KK15029800160, KK15029800162, KK15029800157, KK15029800104, KK15029800161, KK15029800102, KK15029800154, KK15029800185.

15. THIS FINANCING STATEMENT AMENDMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):

17. Description of real estate:

18. MISCELLANEOUS:

FILING OFFICE COPY

23-00345317
08/07/2023 05:00 PM

FILEDTEXAS
SECRETARY OF STATE

SOS



1272611280009

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)
CSC 1-800-858-5294B. E-MAIL CONTACT AT SUBMITTER (optional)
SPRFiling@cscglobal.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

2619 75964
CSC
 801 Adlai Stevenson Drive
 Springfield, IL 62703

Filed In: Texas
(S.O.S.)**SEE BELOW FOR SECURED PARTY CONTACT INFORMATION**1a. INITIAL FINANCING STATEMENT FILE NUMBER
18-0042658973 12/6/20181b. This FINANCING STATEMENT AMENDMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS. File: Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13.2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party(y)ies) authorizing this Termination Statement3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9, check ASSIGN COLLATERAL box in item 8 and describe the affected collateral in item 84. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects Debtor or Secured Party of record

CHANGE name and/or address: Complete

 ADD name: Complete item DELETE name: Give record name 7a or 7b, and item 7c to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (5a or 6b)

6a. ORGANIZATION'S NAME **Cowan Fitness South Round Rock, LLC**

OR 6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Check only one box:

 ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* collateral

Indicate collateral:

*Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 8

All assets and personal property of the Borrower and any assets in which the Borrower may have previously granted a security interest to Lender in each case, whether now or hereafter existing, which is now or hereafter owned by Borrower or in which Borrower now has or hereafter acquires rights, and howsoever Borrower's interests therein may arise or appear (whether by ownership, security interest, claim or otherwise), including, but not limited to: (A) all equipment, fixtures, inventory, goods, accounts, chattel paper, general intangibles, documents, instruments, contracts, securities, in each case as such terms are defined in the Code (B) the items listed below or in any Schedule "A" which may be

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor9a. ORGANIZATION'S NAME **Firestone Financial, LLC**

OR 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor: Cowan Fitness South Round Rock, LLC

2619 75964

UCC FINANCING STATEMENT AMENDMENT ADDENDUM
FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
18-0042658973 12/6/2018

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

Firestone Financial, LLC

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME

OR 13b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral) OR OTHER INFORMATION (Please Describe)

attached hereto and made a part hereof, and (C) such items which shall be listed on any Addendums to Schedule "A" and which shall be attached to any Promissory Note or other amendment to any security agreement and made a part hereof; and (ii) all parts of, all accessions to, all replacements for, all products of, all payments of any type in lieu of or in respect of, and all documents and general intangibles covering or relating to, any or all of the foregoing; all proceeds of any and all of the foregoing Collateral and, to the extent not otherwise included, all payments under insurance (whether or not Lender is the loss payee thereof), or under any indemnity, warranty or guaranty by reason of loss to or otherwise with respect to any of the foregoing Collateral. (14) Freemotion Reflex Treadmill SN: KK15029800109, KK15029800108, KK15029800163, KK15029800158, KK15029800164, KK15029800110, KK15029800160, KK15029800162, KK15029800157, KK15029800104, KK15029800161, KK15029800102, KK15029800154, KK15029800185.

15. This FINANCING STATEMENT AMENDMENT:

covers timber to be cut. covers as-extracted collateral. is filed as a fixture filing.

16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):

17. Description of real estate:

18. MISCELLANEOUS:

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company 251 LITTLE FALLS DRIVE Wilmington, DE 19808 USA

FILING NUMBER: 19-0036517587

FILING DATE: 09/25/2019 01:49 PM

DOCUMENT NUMBER: 916051940001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Cowan Fitness South Round Rock LLC	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
OR 1b. INDIVIDUAL'S SURNAME				
1c. MAILING ADDRESS 808 Shady Bluff Cove	CITY Round Rock	STATE TX	POSTAL CODE 78665	COUNTRY USA
2. DEBTOR'S NAME - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here <input type="checkbox"/> and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)				
2a. ORGANIZATION'S NAME Firestone Financial, LLC	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
OR 2b. INDIVIDUAL'S SURNAME				
2c. MAILING ADDRESS 117 Kendrick Street, Suite 200	CITY Needham	STATE MA	POSTAL CODE 02494-2728	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Firestone Financial, LLC	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
OR 3b. INDIVIDUAL'S SURNAME				
3c. MAILING ADDRESS 117 Kendrick Street, Suite 200	CITY Needham	STATE MA	POSTAL CODE 02494-2728	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All assets and personal property of the Borrower and any assets in which the Borrower may have previously granted a security interest to Lender in each case, whether now or hereafter existing, which is now or hereafter owned by Borrower or in which Borrower now has or hereafter acquires rights, and howsoever Borrower's interests therein may arise or appear (whether by ownership, security interest, claim or otherwise), including, but not limited to (A) all equipment, fixtures, inventory, goods, accounts, chattel paper, general intangibles, documents, instruments, contracts, securities, in each case as such terms are defined in the Code (B) the items listed below or in any Schedule "A" which may be attached hereto and made a part hereof, and (C) such items which shall be listed on any Addendums to Schedule "A" and which shall be attached to any Promissory Note or other amendment to any security agreement and made a part hereof; and (ii) all parts of, all accessions to, all replacements for, all products of, all payments of any type in lieu of or in respect of, and all documents and general intangibles covering or relating to, any or all of the foregoing; all proceeds of any and all of the foregoing Collateral and, to the extent not otherwise included, all payments under insurance (whether or not Lender is the loss payee thereof), or under any indemnity, warranty or guaranty by reason of loss to or otherwise with respect to any of the foregoing Collateral.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box.

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

[170360937]

FILING OFFICE COPY

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)

CSC

B. E-MAIL CONTACT AT SUBMITTER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Corporation Service Company
251 LITTLE FALLS DRIVE
Wilmington, DE 19808
USA

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

FILING NUMBER: 24-00477228**FILING DATE:** 08/20/2024 02:45 PM**DOCUMENT NUMBER:** 1394478930001**FILED:** Texas Secretary of State**IMAGE GENERATED ELECTRONICALLY FOR XML FILING****THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

1a. INITIAL FINANCING STATEMENT FILE NUMBER

19-0036517587

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement3. **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and also name of Assignor in item 9.For partial assignment, complete item 7 and 9 and also indicate affected collateral in item 84. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. **PARTY INFORMATION CHANGE:**Check one of these two boxes. This Change affects Debtor or Secured Party of record. AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item **ADD** name: Complete item 7a or 7b, **DELETE** name: Give record name
7a or 7b and item 7c to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

Firestone Financial, LLC

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

10012776 - 55991 [290809125]

FILING OFFICE COPY

**EXHIBIT
F**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
--

CSC

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Corporation Service Company
251 LITTLE FALLS DRIVE
Wilmington, DE 19808
USA

FILING NUMBER: 20-0037139813

FILING DATE: 07/21/2020 05:40 PM

DOCUMENT NUMBER: 984579780001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

Cowan Fitness South Round Rock LLC

OR

1b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

808 Shady Bluff Cove

Round Rock

TX

78665

USA

2. DEBTOR'S NAME - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

U.S. Small Business Administration

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

1545 Hawkins Blvd, Suite 202

El Paso

TX

79925

USA

4. COLLATERAL: This financing statement covers the following collateral:

All tangible and intangible personal property, including, but not limited to:

(a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles, including payment intangibles and software and (k) as-extracted collateral as such terms may from time to time be defined in the Uniform Commercial Code. The security interest Borrower grants includes all accessions, attachments, accessories, parts, supplies and replacements for the Collateral, all products, proceeds and collections thereof and all records and data relating thereto. 232538 8105

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

6b. Check only if applicable and check only one box.

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

[193435973]

FILING OFFICE COPY

**EXHIBIT
G**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) JOHN JAMES
B. E-MAIL CONTACT AT SUBMITTER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) **CT Lien Solutions 2929 Allen Parkway, Ste. 3300 Houston, TX 77019 USA
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

FILING NUMBER: 25-0007925161

FILING DATE: 02/26/2025 04:57 PM

DOCUMENT NUMBER: 1456022090001

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR XML FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME COWAN FITNESS SOUTH ROUND ROCK LLC				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 661 LOUIS HENNA BLVD STE 450	CITY ROUND ROCK	STATE TX	POSTAL CODE 78664	COUNTRY USA

2. DEBTOR'S NAME - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) - Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME C T Corporation System, as representative				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 330 N Brand Blvd, Suite 700, Attn: Glendale SPRS	CITY	STATE CA	POSTAL CODE 91203	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
The equipment, inventory, and personal property related thereto financed under, covered by or described in the lease, rental, equipment finance agreement or installment payment agreement designated as Agreement No. 2826306 (collectively, "Collateral"), together with all replacements for, additions to, substitutions for and accessions to the Collateral and all proceeds of any of the foregoing, including, without limitation, proceeds of insurance. A more detailed description of the Collateral is maintained by secured party/lessor in its books and records and may be made available upon request to the secured party/lessor.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative6a. Check only if applicable and check only one box:6b. Check only if applicable and check only one box. Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

PROPOSED ORDER

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF TEXAS
AUSTIN DIVISION**

IN RE:	§	
	§	CASE NO. 25-10935-smr
COWAN FITNESS SOUTH	§	
ROUND ROCK, LLC	§	CHAPTER 11
	§	SUBCHAPTER V
DEBTOR	§	

**INTERIM ORDER AUTHORIZING USE OF
CASH COLLATERAL AND GRANTING ADEQUATE PROTECTION**

Came on for consideration the *Motion of Cowan Fitness South Round Rock, LLC. to Use Cash Collateral* (the “Application”) filed on March 24, 2025 by Cowan Fitness South Round Rock, LLC (the “Debtor”) pursuant to Section 363(c) of Title 11 of the United States Code (the “Bankruptcy Code”) and Rule 4001(c) of the Federal Rules of Bankruptcy Procedure (the “Rules”). The Debtor appeared through its attorney of record, Frank B. Lyon. The Subchapter V

Trustee and the United States Trustee, also appeared. After consideration of the Application, the file and record in this Chapter 11 case, and sufficient cause appearing;

THE COURT HEREBY MAKES THE FOLLOWING FINDINGS OF FACTS AND CONCLUSIONS OF LAW:

A. Petition. On March 24, 2025 (the “Petition Date”), the Debtor filed its voluntary petition under Chapter 11 Subchapter V of the Bankruptcy Code. The Debtor is a debtor-in-possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.

B. Jurisdiction. The Court has jurisdiction over this proceeding and the parties and property affected hereby pursuant to 28 U.S.C. §§ 157(b) and 1334. The Application is a “core” proceeding as defined in 28 U.S.C. § 157(b). Venue of this case and the Application in this Court is proper pursuant to 28 U.S.C. §§ 1408 and 1409.

C. Notice. The Debtor gave sufficient notice of the Application. Notice of the Application and the related hearing has also been given to the Debtor’s 20 largest unsecured creditors and to the United States Trustee for the Western District of Texas. Such notice complies with Bankruptcy Rule 4001(c).

D. Adequate Protection of the Lenders. The Lenders (as defined in the Motion) will receive adequate protection of their interests in its collateral in the form of replacement liens on all post-petition property of the Debtor as described in their UCC-1 financing statements filed with the Secretary of State of Texas.

E. Immediate Entry. Sufficient cause exists for immediate entry of this Order pursuant to Bankruptcy Rule 4001(c)(2). No party appearing in this case has filed or made an objection to the relief sought in the Application and the entry of this Order, or any objections that were made are hereby overruled, or have been resolved by agreement.

F. Best Interests. It is in the best interests of the creditors and the estate for the entry of this Order.

G. Based upon the foregoing, and after due consideration and good cause appearing,

IT IS HEREBY ORDERED, ADJUDGED AND DECREED THAT:

I. AUTHORIZATION AND CONDITIONS TO USE OF CASH COLLATERAL

1. Application Granted. The Application is granted pursuant to Bankruptcy Rule 4001(c)(2) to the extent that the Debtor is authorized to use cash collateral in accordance with Exhibit A attached hereto. The expenses of the Debtor shall not exceed the budgeted amount by more than 10% per line item, and 5% in the aggregate, absent the written consent of First National Bank and the U.S. SBA or further order of the Court. The Debtor shall have the right to seek authority to use Cash Collateral on an expedited basis from the Court.

II. POST-PETITION LIENS; ADEQUATE PROTECTION

2. Post-petition Liens. As adequate protection for the Debtor's use of cash collateral generated by its Collateral, The Lenders (as defined in the Motion) are hereby granted replacement security interests in and liens upon all categories of property of the Debtor and its estate, upon which it held valid, perfected and enforceable pre-petition liens and security interests in the same priority as pre-petition to the extent and only to the extent that such pre-petition lien and security interests are valid, perfected, enforceable and nonavoidable.

3. For the avoidance of doubt, the post-petition liens granted by this Order do not extend to any Chapter 5 causes of action or other avoidance actions held or that may be held by the Debtor.

III. FINAL HEARING

4. Final Hearing. A final hearing on Debtor's Use of Cash Collateral is set for the date and time and manner set forth above. Counsel for Debtor is responsible for notice.

IV. RETENTION OF JURISDICTION

5. Retention of Jurisdiction. IT IS FURTHER ORDERED that the Court shall retain jurisdiction with respect to all matters arising from or relating to the implementation, enforcement, and/or interpretation of this Order.

#

Order prepared by:

LAW OFFICES OF FRANK LYON

By:/s/ Frank B. Lyon

Frank B. Lyon

Texas State Bar No. 12739800

Physical Address:

3800 North Lamar Boulevard, Suite 200

Austin, Texas 72756

Mailing Address:

Post Office Box 50210

Austin, Texas 78763

Telephone: 512.345.8964

Faxsimile: 512.697.0047

frank@franklyon.com

*Proposed Counsel for Cowan Fitness South Round Rock,
LLC*

EXHIBIT A

6 Week Budget

Store Number:	Cowan Fitness South Round Rock LLC
Location:	OT - 0308 Round Rock
Start Date:	3/30/25
End Date:	5/10/25

PROFIT AND LOSS

	Mar 30-April 5	April 6 - 12	April 13-19	April 20-26	April 27 - May 3	May 4-10	
	Beginning Cash	\$ 60,000.00	\$35,099.00	\$43,068.00	\$36,010.00	\$ 41,625.00	\$ 16,724.00
Ordinary Income Expense							
Drop In Revenue							
Package Revenue	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00	\$ 230.00
Membership Revenue - varies monthly	\$ 13,183.00	\$13,183.00	\$13,183.00	\$13,183.00	\$ 13,183.00	\$ 13,183.00	\$ 13,183.00
Internal Events							
Cross Regional Classes - Franchisor administered							
Clothing	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)	\$ (1,000.00)
Heart Rate Monitor Revenue (varies monthly)	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00	\$ 350.00
Chargebacks		\$ (132.00)		\$ (132.00)			\$ (132.00)
Total Revenue	\$ 12,763.00	\$12,631.00	\$12,763.00	\$12,631.00	\$ 12,763.00	\$ 12,631.00	
Direct Labor - Trainer/Instructor Wages	\$ 11,700.00		\$ 11,700.00		\$ 11,700.00		
Direct Labor - Trainer/Instructor Bonus	\$ 535.00		\$ 535.00		\$ 535.00		
Merchant Charges - credit card processing					\$ 1,482.00		
Retail Product Costs		\$ 992.00		\$ 992.00		\$ 992.00	
Total Cost of Goods/Services	\$ 12,235.00	\$ 992.00	\$12,235.00	\$ 2,474.00	\$ 12,235.00	\$ 992.00	
Gross Profit	\$ 528.00	\$11,639.00	\$ 528.00	\$10,157.00	\$ 528.00	\$ 11,639.00	
Total Personnel (Fixed Costs)							
Payroll Taxes	\$ 2,765.00		\$ 2,765.00		\$ 2,765.00		
Reimbursed Expenses	\$ 150.00		\$ -		\$ 150.00		
Payroll Processing Fees - ADP	\$ 207.00		\$ 207.00		\$ 207.00		
Officers Health Insurance - Life Insurance			\$ 81.00				
Total Personnel (Other Costs)	\$ 3,122.00	\$ -	\$ 3,053.00	\$ -	\$ 3,122.00	\$ -	
Rent	\$ 11,730.00		\$ -		\$ 11,730.00		
Storage Rent		\$ -					
Repairs & Maintenance			\$ 500.00				
Utilities	\$ 1,000.00		\$ -		\$ 1,000.00		
Music System							
Cleaning	\$ -				\$ -		
Janitorial Expense	\$ 215.00				\$ 215.00		
Telephone/Internet Expense		\$ 390.00					\$ 390.00
Total Facility	\$ 12,945.00	\$ 390.00	\$ 500.00	\$ -	\$ 12,945.00	\$ 390.00	
General Liability Insurance	\$ 632.00		\$ -		\$ 632.00		
Total Insurance	\$ 632.00	\$ -	\$ -	\$ -	\$ 632.00	\$ -	
Direct Marketing - required by Franchisor	\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 355.00	
National Marketing Fund - 3% of Revenue paid to Franchisor		\$ 1,650.00		\$ -			\$ 1,650.00
Total Marketing	\$ 355.00	\$ 2,005.00	\$ 355.00	\$ 355.00	\$ 355.00	\$ 2,005.00	
Professional Fees - Accounting			\$ 603.00				
Professional Fees - Legal	\$ 4,000.00		\$ -	\$ -	\$ 4,000.00		
Sub V Trustee Fees	\$ 1,000.00		\$ -	\$ -	\$ 1,000.00		
Software Lease/Support paid to Franchisor	\$ -		\$ 1,048.00	\$ -			
Royalty Fees - 6% of revenue paid to Franchisor	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	
Printing and Reproduction		\$ 400.00					\$ 400.00
Office Supplies			\$ 250.00				
Dues and Subscriptions		\$ 50.00					\$ 50.00
Equipment Lease - 14 Treadmills			\$ -	\$ 1,964.00			
Equipment Repairs & Maintenance	\$ 550.00						\$ 550.00
Bank Service Charges							
Music/On Hold							
Total General and Administrative	\$ 6,375.00	\$ 1,275.00	\$ 1,678.00	\$ 3,837.00	\$ 6,375.00	\$ 1,275.00	
Total Expenses	\$ 23,429.00	\$ 3,670.00	\$ 5,586.00	\$ 4,192.00	\$ 23,429.00	\$ 3,670.00	
Net Operating Income	\$ (22,901.00)	\$ 7,969.00	\$ (5,058.00)	\$ 5,965.00	\$ (22,901.00)	\$ 7,969.00	

Other Miscellaneous Income

Total Other Income	\$	-	\$	-	\$	-	\$	-	\$	-	-	
Taxes - Local					\$	350.00			\$		-	
Miscellaneous Expense												
Automobile Expense	\$	-					\$		\$	-		
Meals												
Travel Expense					\$	-						
Owner Compensation - Greg Cowan	\$	1,000.00			\$	1,000.00			\$	1,000.00		
Owner Compensation - Kathy Cowan	\$	1,000.00			\$	1,000.00			\$	1,000.00		
Interest & Credit Expense												
SBA Interest Expense	\$	-					\$		\$	-		
Finance Charge					\$	-						
Total Other Expenses	\$	2,000.00	\$	-	\$	2,000.00	\$	350.00	\$	2,000.00	\$	-

Net Income	\$ (24,901.00)	\$ 7,969.00	\$ (7,058.00)	\$ 5,615.00	\$ (24,901.00)	\$ 7,969.00
Ending Cash	\$ 35,099.00	\$43,068.00	\$36,010.00	\$41,625.00	\$ 16,724.00	\$ 24,693.00

25-10395-smr Doc#6 Filed 03/25/25 Entered 03/25/25 20:24:43 Main Document Pg 50 of
Label Matrix for local noticing Cowan Fitness South Round Rock LLC U.S. BANKRUPTCY COURT
0542-1 808 Shady Bluff Cv. 903 SAN JACINTO, SUITE 322
Case 25-10395-smr Round Rock, TX 78665-5644 AUSTIN, TX 78701-2450

Western District of Texas

Austin

Tue Mar 25 19:28:53 CDT 2025

(p)ASCENTIUM CAPITAL
ATTN BANKRUPTCY
23970 US 59 NORTH
KINGWOOD TX 77339-1535

Cowan Fitness North Round Rock LLC
808 Shady Bluff Cove
Round Rock, TX 78665-5644

Firestone Financial, LLC
c/o Berkshire Bank
100 Westminster Street
Providence, RI 02903-2363

First National Bank
4140 E. State Street
Hermitage, PA 16148-3401

Gregory Robert Cowan
808 Shady Bluff Cove
Round Rock, TX 78665-5644

HTS Texas
2251 Picadilly Drive Suite B260
Round Rock, TX 78664-8657

Katherine Danneman Cowan
808 Shady Bluff Cove
Round Rock, TX 78665-5644

Rassier Properties
3006 Bee Caves Road Suite C-250
Austin, TX 78746-6788

Rassier Properties
Attn: John Rassier
321 Hartz Avenue Suite 7
Danville, CA 94526-3336

The County of Williamson, Texas
c/o McCreary, Veselka, Bragg & Allen
P.O. Box 1269
Round Rock, TX 78680-1269

U. S. Small Business
Office of Disaster Assistance
14925 Kingsport Road
Fort Worth, TX 76155-2243

Ultimate Fitness Group, LLC
6000 Broken Sound Pkwy NW
Boca Raton, FL 33487-2704

United States Trustee - AU12
United States Trustee
903 San Jacinto Blvd, Suite 230
Austin, TX 78701-2450

Wells Fargo Bank NA
Po Box 51174
Los Angeles, CA 90051-5474

Wells Fargo Bank, NA
625 Marquette Avenue 13th Floor
Minneapolis, MN 55402-2308

Eric Terry
Eric Terry Law, PLLC
3511 Broadway
San Antonio, TX 78209-6513

Frank B. Lyon
Frank B. Lyon, Attorney
PO Box 50210
Austin, TX 78763-0210

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

Ascentium
23970 Hwy 59 N
Kingwood, TX 77339

End of Label Matrix
Mailable recipients 19
Bypassed recipients 0
Total 19